

# 3484840  
# 3512232

# 3517737

# 3536754

3554933

3516277

(Inmate Reg. # of each Plaintiff)

**FILED**

OCT - 1 2018

**RORY L. PERRY II, CLERK**  
U.S. District Court  
Southern District of West Virginia

**CIVIL ACTION NO. 2:18-cv-1335**

(Number to be assigned by Court)

South Central Reg JAIL

(Enter above the full name of the defendant  
or defendants in this action)

## COMPLAINT

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes

No ✓

- B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit:

Plaintiffs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Defendants: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county);

\_\_\_\_\_

\_\_\_\_\_

3. Docket Number: \_\_\_\_\_

4. Name of judge to whom case was assigned:

\_\_\_\_\_

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

\_\_\_\_\_

\_\_\_\_\_

6. Approximate date of filing lawsuit: \_\_\_\_\_

7. Approximate date of disposition: \_\_\_\_\_

II. Place of Present Confinement: SCRJ

A. Is there a prisoner grievance procedure in this institution?

Yes ☒ No ☐

B. Did you present the facts relating to your complaint in the state prisoner grievance procedure?

Yes ☒ No ☐

C. If your answer is YES:

1. What steps did you take? put a Grievance in.

2. What was the result? no response

D. If your answer is NO, explain why not: \_\_\_\_\_

III. Parties

(In item A below, place your name and inmate registration number in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)

A. Name of Plaintiff: Joseph Lobits III #3576277

Address: 509 vine st South Charleston WV 25309

B. Additional Plaintiff(s) and Address(es): Earl M. Hoover III

5 Don Lane white Plains NY 10607

Jeremy CAMP 418 BAYCOR CANE CHAS, WV 25312

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

C. Defendant: \_\_\_\_\_

is employed as: \_\_\_\_\_

at \_\_\_\_\_

D. Additional defendants: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I Earl Hoover, Black mold is everywhere, where  
we sleep, where we shower, where we work  
its on Everything & no one is doing anything  
About it!!

I Jeremy Camp IS GOING THROUGH THIS OUTBREAK  
OF MOLD CAUSING ME TO COUGH CONSTANTLY  
AND STAY STUFFY IN THE NOSE

**IV. Statement of Claim (continued):**

why do we have to live in a unsanitary  
environment with Black mold on every wall including  
the cell walls and the shower walls also in the kitchen.  
Also every kind of of hep A,B,C is ~~an~~ a outbreak  
right now and we can't even get bleach or cleaning  
supplies on a regular basis. Think the mold could  
be causing me to have shortness of breath.

**V. Relief**

State briefly exactly what you want the court to do for you. Make no legal arguments.  
Cite no cases or statutes.

"Justice"

**V. Relief (continued)):**

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**VII. Counsel**

- A. If someone other than a lawyer is assisting you in preparing this case, state the person's name:

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- B. Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?

Yes \_\_\_\_\_

No   /  

If so, state the name(s) and address(es) of each lawyer contacted:

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If not, state your reasons: \_\_\_\_\_

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- C. Have you previously had a lawyer representing you in a civil action in this court?

Yes \_\_\_\_\_

No   /

If so, state the lawyer's name and address:

\_\_\_\_\_  
\_\_\_\_\_

Signed this 16<sup>th</sup> day of Sept, 20 18.

*William C. Strong*  
*William C. Strong* 3571755

*William C. Strong*  
*William C. Strong*

*Earl M. Hoover III*

*John Lobs*

Signature of Plaintiff or Plaintiffs

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 9/16/18  
(Date)

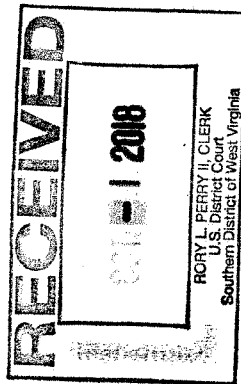
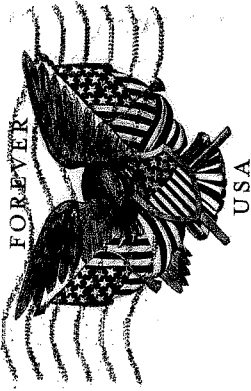
~~*John Lobs*~~ *Earl M. Hoover III*  
Signature of Movant/Plaintiff

\_\_\_\_\_  
Signature of Attorney  
(if any)

Earl M. Hoover III  
1001 Centre Way  
Charleston W.V. 25309

CHARLESTON WV 253

27 SEP 2018 PM 2 L



Clerk, United States District Court  
P.O. Box 2546  
Charleston, West Virginia 25329

25329-254646

